

Norridge Police Department

Accident Review Board

Date assigned	Member	Present	Excused	Unexcused
5/1/2003	Sgt.Orlando	x		
5/1/2003	Cpl. Schober	x		
12/1/2012	Off. Turano	x		
5/1/2003	Off. Malicki	x		

Review Date: 02/01/16

M/V Crash: 16-01444

Officer: A/O Wendell #52

Squad #517

1.Classification I.

- a.The incident was NON-PREVENTABLE and the employee was not at fault. Caution was apparently excercised.
- b.The employee was legally parked or standing.
- c.The employee was aware of the impending hazard,was alert to the consequences and skillful in minimizing the effect of the hazard.
- d.In incidents the board resolves to be Classification I,no disciplinary action will be taken.

2.Classification II.

- a.The employee failed to exercise reasonable and due care.
- b.The employee deviated inexcusably from Dept. Rules and Regulations,Procedures and/or General Safety Practices. procedures and/or general safety practices.
- c.In incidents the board resolves to be Classification II,disciplinary action recommended may be:
 - (i) For the very first incident of record for the employee in a rolling 24 month period, a letter of reprimand will be issued and attendance and successful completion of a "Defensive Driving Course may be ordered.Only one letter of reprimand may be issued during the 24 month period in which the incident occurred.
 - (ii)For a second Classification II finding by the board in the 24 month period a 2 day suspension without pay shall be imposed.
 - (iii)For a third Classificaton II finding by the board in a 24 month period,a 3 day suspension without pay shall be imposed.

Recommendation: The board unanimously agreed 1b.

Sheet 1 of 1 Sheets

DRAG U1 U2 PEDV TRFD TRFC WEAT DRVA 9 VIS 11 VEHD 11 LGHT 1 COLL 11 MANV 23 PPA 99 PPL 9

POL13

U130289148

INVESTIGATING AGENCY NORRIDGE

DAMAGE TO ANY ONE PERSON'S VEHICLE / PROPERTY \$500 OR LESS \$501 - \$1,500 OVER \$1,500

TYPE OF REPORT ON SCENE NOT ON SCENE (DESK REPORT) AMENDED

No Injury / Drive Away Injury and / or Tow Due To Crash

AGENCY CRASH REPORT NO. 16 1444

TRFW 7

ADDRESS NO. 4104

HIGHWAY or STREET NAME Harlem

CITY NORRIDGE

COUNTY COOK

INTERSECTION RELATED PRIVATE PROPERTY HIT & RUN

DATE OF CRASH 01/30/16

TIME 11:49 AM

DOORING WITH PEDALCYCLIST?

NUMBER MOTOR VEHICLES INVLD 2

LARS CODE 5999859C

VEHT 15

U2 1

NO LANE 0

ALGN 1

RSUR 1

VEHU 2

U2 6

RDEF 1

BAG 96

U1 96

U2 96

OCCS 1

U1 1

U2 1

DIRP 5

U1 1

U2 1

NAME DRIVER PARKED DRIVERLESS PED PEDAL EQUUS NMV NCY DATE OF BIRTH

SA LAZAR, ROSALINA C.

SEX F 2 4

MAKE HONDA

MODEL CRV

YEAR 01

CIRCLE NUMBER(S) FOR DAMAGED AREA(S) 00 - NONE 10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN

POINT OF FIRST CONTACT 5

INSURANCE CO. METRO MILE

OWNER ADDRESS (STREET, CITY, STATE, ZIP) SAME

VEHICLE OWNER (LAST, FIRST M.I.) SAME

NAME DRIVER PARKED DRIVERLESS PED PEDAL EQUUS NMV NCY DATE OF BIRTH

WENDELL, CHRISTINE M.

SEX F 2 4

MAKE CHEVROLET

MODEL IMPALA

YEAR 08

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INSURANCE CO. UNDERWRITERS AT LLOYD LONDON

OWNER ADDRESS (STREET, CITY, STATE, ZIP) 4020 N. OLCOTT, NORRIDGE, IL 60706

VEHICLE OWNER (LAST, FIRST M.I.) VILLAGE OF NORRIDGE

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REMEMBER TO USE BLACK INK, PRESS HARD, PRINT LEGIBLY AND COMPLETE ALL REQUIRED FIELDS!

***IF YES TO COM VEH, COMPLETE MOTOR VEHICLE AREA ON BACK**

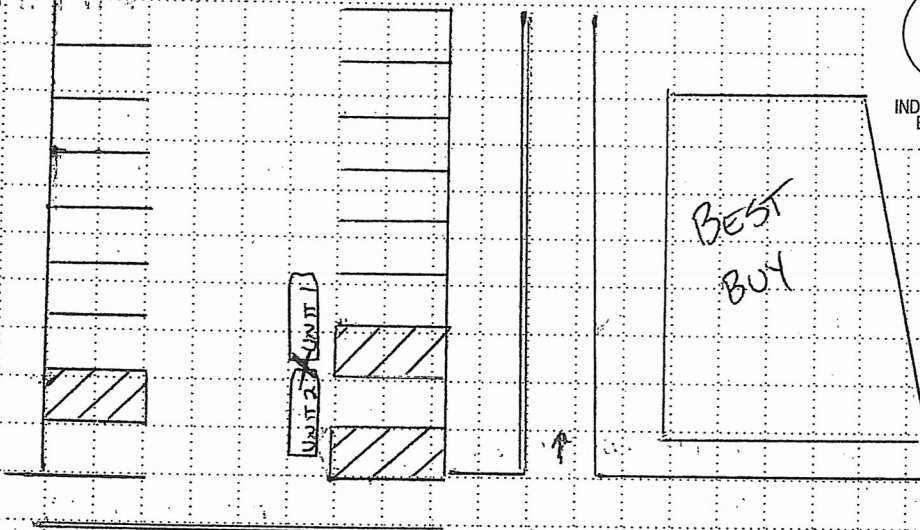
U130289148

A Diagram and Narrative are required on all **Type B** crashes, even if units have been moved prior to the officer's arrival.



INDICATE NORTH BY ARROW

* PARKING LOT AT 4104 HARLEM
* DRAWING NOT TO SCALE



NARRATIVE (Refer to vehicle by Unit No.)

THE FOLLOWING WAS RELATED TO ME BY THE DRIVERS OF BOTH VEHICLES.

UNIT 1 WAS FACING NORTH IN THE PARKING LOT AT 4104 HARLEM. UNIT 2 WAS STOPPED FACING NORTH BEHIND UNIT 1. UNIT 1 STARTED TO BACK UP AND STRUCK THE FRONT OF UNIT 2.

UNIT 1 DIDN'T REPORT ANY DAMAGE. UNIT 2 HAD MINOR FRONT END DAMAGE.

NO INJURIES WERE REPORTED AND NO TOWS WERE REQUIRED.

LOCAL USE ONLY

U1 Color **BLACK**U2 Color **WHITE**

U1 Towed by / to

N/A

U2 Towed by / to

N/A

COMMERCIAL MOTOR VEHICLE (CMV)

IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A ADDITIONAL UNITS FORMS.

A CMV is defined as any motor vehicle used to transport passengers or property and:

1. Has a weight rating of more than 10,000 pounds (example: truck or truck/trailer combination); or
2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or
3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or
4. Is used or designated to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

CARRIER NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

USDOT NO. _____

ILCC NO. _____

Source of above info. ☐ Side of Truck ☐ Papers ☐ Driver ☐ Log Book

Gross Vehicle Weight Rating (GVWR) _____

Were HAZMAT placards displayed on the vehicle? ☐ Y ☐ N

If yes, name on placard _____

4-digit UN no. _____ 1-digit Hazard Class no. _____

Did HAZMAT spill from the vehicle (do not consider fuel from the vehicle's own tank)? ☐ Y ☐ N ☐ UNKDid HAZMAT Regulations violation contribute to the crash? ☐ Y ☐ N ☐ UNKDid Motor Carrier Safety Regulations (MCS) violation contribute to the crash? ☐ Y ☐ N ☐ UNK

Was a Driver/Vehicle Examination Report form completed?

HAZMAT ☐ Y ☐ N ☐ UNK Out of Service? ☐ Y ☐ NMCS ☐ Y ☐ N ☐ UNK Out of Service? ☐ Y ☐ N

Form No. _____

IDOT PERMIT NO. _____

WIDE LOAD? ☐ Y ☐ NTRAILER WIDTH(S): 0-96" ☐97-102" ☐>102" ☐TRAILER 1 ☐☐☐TRAILER 2 ☐☐☐

TRAILER LENGTH(S): 1 _____ ft

TRAILER 2 _____ ft

TOTAL VEHICLE LENGTH _____ ft

NO. OF AXLES _____

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION _____

CARGO BODY TYPE _____ LOAD TYPE _____